LB
341
W6A5
1918

THE LIBRARY OF CONGRESS
1800

Class [illegible]
Book [illegible]
1918

Latest edition 1918.

Please Preserve for Future Reference

RULES

OF THE

STATE BOARD OF HEALTH

RELATING TO THE SANITARY CARE OF SCHOOLS

These rules were officially adopted by the State Board of Health on January 29, 1913, and published in the official state paper on May 30, 1913. Under the provisions of section 1408, Wisconsin Statutes, these rules have the full force of law.

Rule 17. Attendance at School, when Prohibited. All teachers, school authorities and health officers having jurisdiction shall not permit the attendance in any private, parochial or public school of any pupil afflicted with a severe cough, a severe cold, itch, lice or other vermin, or any contagious skin disease, or who is filthy in body or clothing, or who has any of the following dangerous, contagious or infectious diseases to wit: Diphtheria, smallpox, scarlet fever, measles, whooping cough, chicken pox, mumps, pulmonary tuberculosis, Asiatic cholera, (cholerine), yellow fever, typhus fever, bubonic plague, cerebrospinal meningitis or acute anterior poliomyelitis. The teachers in all schools shall, without delay, send home any pupil who is obviously sick even if the ailment is unknown, and said teacher shall inform the parents or guardians of said pupil and also the local health officer as speedily as possible, and said health officer shall examine into the case and take such action as is reasonable and necessary for the benefit of the pupils and to prevent the spread of infection.

Rule 18. Duty of Parents. Parents, guardians or other persons having control of any child who is sick in any way, or who is afflicted with any disease listed in Rule 17, shall not permit said child to

LB3412
.W6A5
1918

attend any public, private or parochial school or to be present in any public place.

Rule 19. Duty of Teachers, Etc. School-teachers, pupils or other persons shall not be admitted to any public, private or parochial school who have come from, or who reside in any house or building which harbors or is infested with Asiatic cholera (cholerine), yellow fever, smallpox, typhus fever, bubonic plague, diphtheria, (membranous croup), scarlet fever (scarlatina), measles, (See exceptions) cerebrospinal meningitis or acute anterior poliomyelitis.

Children who have had measles may attend school. Well children in the family who have not had measles may return to school after fourteen days from date of last exposure provided they take up their residence in another home. Children who have measles are not permitted to leave the premises, and all children other than members of the family shall not enter or remain upon the premises while the home is placarded.

Rule 20. Air and Floor Space. The minimum requirements of the State Building Code, published by the Industrial Commission, in existing buildings and new buildings is 12 sq. ft. of floor space for each person in the primary grades, 14 sq. ft. per person in the grammar grades and 16 sq. ft. per person for all other schoolrooms. All class, recitation and study rooms (not including manual training or domestic science rooms) shall be at least 12 ft. high in the clear; all other rooms shall be at least 8 ft. high in the clear.[1]

The provisions of the State Building Code relative to the ventilation of school buildings require that all parts of the building except the corridors, passageways and stairways shall be provided with fresh air at the rate of at least 1200 cubic feet per person per hour.[2]

Rule 21. Duty of Health Officers. Local health officers having jurisdiction shall dismiss forthwith any schoolroom in which at least 144 cubic feet of air space is not supplied to each pupil. The school authorities shall without delay make provisions for the pupils in accordance with the requirements stated in Rule 20.

Rule 22. Ventilation. Proper ventilation must be provided in all schoolrooms and when ventilation ducts do not exist, or are inadequate, it shall be the duty of the teacher to flood the schoolroom with fresh air by opening windows and doors at recess and noontime and also whenever the air becomes close and foul. Pupils should be given gymnastic exercises during the time the windows are open in cold weather.

---

[1] **Note**—A local or state building permit must be obtained for all new schools both public and parochial. (See building code published by the State Industrial Commission.)

[2] **Note**—See Order No. 6305 of the State Building Code on Existing Buildings and Orders No. 5611 and 5617 on New Buildings.

D. of D.
DEC 4 1918

When windows are the only means of ventilation they should be so constructed as to admit of ready adjustment both at the top and bottom, and some device shall be provided to protect the pupils from currents of cold air. The top of the windows shall be as near the ceiling as the mechanical construction of the building will allow.

Rule 23. Heating. It shall be unlawful for any school board, board of school directors, board of education, or other school officials of Wisconsin, to use a common heating stove for the purpose of heating any schoolroom, unless each such stove shall be in part enclosed within a shield or jacket made of galvanized iron or other suitable material, and of such height and so placed as to protect all pupils while seated at their desks from direct rays of heat.

Rule 24. Lighting. Consult State Building Code issued by the Industrial Commission. Refer to order number 5612.

Rule 25. Sweeping and Cleaning. All floors must be thoroughly swept, or cleaned by a vacuum cleaner each day, either after the close of school in the afternoon, or one hour before the opening of school in the morning. Before sweeping is started the floors must be sprinkled with moist sawdust, or other substance so as to prevent the raising of dust. [The floors in all schoolrooms and halls should be thoroughly scrubbed with soap and water at least once each month.]

Rule 26. Drinking Water. All schoolhouses must be supplied with pure drinking water. If the drinking water is obtained from wells, satisfactory troughs and drains must be provided so as to carry away the waste water and prevent the creation of mudholes near the opening of the well. When water is not supplied at the pump, from water faucets, or from sanitary flowing drinking fountains, covered tanks or covered coolers, with free flowing faucets, must be supplied. All drinking fountains should be constructed of smooth glass or pressed metal. Children from the same family may be permitted to use one drinking cup.

Rule 27. Toilets. Water-closets, dry closets and outhouses shall be kept clean and sanitary at all times. Water-closets, and dry closets when provided, shall be efficient in every particular, and when said closets are not provided, then good, fly-tight, well-ventilated outhouses for both sexes, separated by closely built fences, shall be provided. Good, dry walks shall lead to all outhouses, and closely built screens, or shields, shall be built in front of them. Outhouses for males shall have urinals arranged with stalls and with conduits of galvanized iron, or other impervious material, draining into a sewer, vault, or other suitable place. See special Bulletin on Rural School Privies issued by the State Board of Health.)

Rule 28. Health officers shall enforce these rules, and promptly enter prosecution for any violation thereof.

Penalty for Violation. Any person who shall wilfully violate any law relating to the public health for which violation no other penalty is prescribed, or any order or regulation of any board of health, lawfully made and duly published, shall be punished by imprisonment in the county jail not more than three months or by fine not exceeding one hundred dollars.

Basement Schools. The use of basements for school purposes is not recommended. Schoolrooms with floors two feet or more below grade, used for seating purposes, should be prohibited. In recitation or classrooms where the floors are below grade the walls and floors in such rooms should be made damp proof and especial care exercised in heating, lighting and ventilating.

The State Building Code published by the Industrial Commission outlines the provisions to be followed in constructing new school buildings.

Disinfection. Section 1408c. All schoolhouses, before school opens at the beginning of each school term, shall be thoroughly cleaned and after the outbreak in such school of any contagious disease, shall be thoroughly cleaned and disinfected as provided by the State Board of Health in its rules and regulations for the fumigation and disinfection of homes, or other buildings. All schoolhouses, homes, and other buildings requiring disinfection shall be disinfected by or under the direction of the local health officer, and the expenses necessarily incurred shall be paid for by the township, incorporated village, or city upon the order of the local board of health.

For fumigating, liberate in the room, by means of a generator, a 40 per cent solution of formaldehyde using not less than ten ounces of formaldehyde for every one thousand cubic feet of air space; or place in a large deep vessel six and one-half ounces of permanganate of potash to which add one pint of a forty per cent solution of formaldehyde. Use the permanganate and formaldehyde in the proportion stated for every thousand cubic feet of air space. Solidified formaldehyde may be used for fumigating if the product has been tested and approved by the State Board of Health.

All rooms to be fumigated must contain plenty of moisture and be heated to a temperature above 72 degrees F.

Several firms have now complied with the rules of the State Board of Health governing the preparation and marketing of solidified formaldehyde and their products may now be used for fumigation. Do not use any preparation of solidified formaldehyde for fumigating purposes unless the same has been tested out and approved by the State Board of Health.

When the material for fumigating is placed in the room all openings should be closed or covered with strips of paper saturated with a strong disinfecting solution and the room left closed for from four to

six hours after which all windows and doors should be opened to allow the free circulation of air.

Follow the fumigating with a thorough cleaning of the premises, wash all woodwork, doors, floors, casings, etc., with an acid solution of bichloride of mercury two drams (one-fourth ounce) to a gallon of water, or six ounces of carbolic acid to a gallon of water. This cleansing process is as important as fumigation.

SUGGESTIONS TO SCHOOL BOARDS

The school board or board of directors of all public and parochial schools should see that all school buildings are provided with suitable washbowls or basins, soap and individual towels. This will enable the teachers to enforce cleanliness among the pupils after the use of the toilets and at other times. This is a very important health measure and should not be neglected.

Cleaning Schoolhouse. The attention of school boards is called to section 1408c of the statutes which provides that all schoolhouses, before school opens at the beginning of each term, shall be thoroughly cleaned, and after the outbreak in such school of any contagious disease, shall be thoroughly cleaned and disinfected as provided for by the State Board of Health in its rules and regulations for the fumigation and disinfection of homes and other buildings. This is a very necessary and important measure for the prevention of disease and should receive your careful consideration.

Water Supply. Have you as members of the school board of your district given the water supply of your school the careful consideration that it deserves? All plank covers to wells should be replaced by a cement cover made water-tight. The ground should be graded away from the well in all directions, and no surface water or mudhole should be allowed to remain near the well. Protect your school wells carefully from all surface drainage. All school wells that have not been used during the vacation months should be pumped out sufficient to remove the stagnant water before school opens. If drinking water is not available on the school premises and the water is carried any great distance covered pails should be provided.

Whenever any school official has reason to believe that the school well or water supply of any public or parochial school is contaminated or unfit for drinking purposes, he should notify the local health officer at once and request him to write to the State Hygienic Laboratory for sterile containers and directions for collecting the water. Water sent in for analysis by local health officers will be analyzed free of charge. The local school board will be required to prepay the express charges upon the water shipped to the laboratory.

Waste Paper Baskets. All schoolrooms should be provided with a wastebasket for the reception of waste paper, etc., and the children encouraged by the teachers in using same.

SCHOOL TOILETS

Toilets. Chapter 56, Section 1407a—6, of the statutes, provides in part:

"The State Board of Health shall have supervision of the health and life of the citizens of the state and possess all powers necessary to fulfill the duties prescribed in the statutes and to bring action in the courts for the enforcement of health laws and health rules."

By subsections 2 and 3, the board is given the power to regulate and prescribe by means of rules and regulations the character and location of plumbing, drainage, water supply, disposal of sewage, garbage or other waste material, and to prosecute violations of such rules and regulations of the State Board of Health.

Members of school boards violating any rule or regulation of the State Board of Health are subject to a fine of from ten to one hundred dollars.

All toilets or closets must be provided with suitable toilet paper. Teachers should see that the school board furnishes such toilet paper for their school.

Over seventy-five per cent of the outdoor toilets or water-closets upon school property are found upon inspection to be in an insanitary and unclean condition. There is no excuse for such conditions. One gallon of paint applied to the seats and floors will prevent the wood from absorbing obnoxious substances and make them much easier to keep clean. See that this improvement is made in your district at once, then have the closets scrubbed often enough to keep them clean. You will find the teachers and pupils more than willing to keep the premises in a sanitary condition if you will show a little pride in their appearance yourselves.

Teachers should be instructed to visit the toilets frequently and to prohibit any obscene or indecent writing or print upon walls or seats or any part of the closet. The state law, section 4509, of the statutes, provides a fine of not to exceed $500 for such offense.

For further particulars and specific requirements governing the design, construction and maintenance of outside privies, see the Wisconsin Code for Rural School Privies, issued by the State Board of Health in 1918.

CHEMICAL AND DRY CLOSETS

The State Board of Health strongly advises against the indiscriminate use of chemical closets, chemical closet systems or the so-called "dry closet". In districts where public water supply sewage or sewer systems are not available, or where an efficient private water supply system of the "compressed air storage" or "air pressure delivery type" or its equivalent can not be reasonably provided and maintained, or where the lay of the land and character of the

soil is such that the effluent from a sewage treatment tank can not be successfully disposed of by one of the variously known methods, a properly designed, constructed and installed chemical or dry closet will be permitted, provided it conforms with the following minimum requirements:

CHEMICAL CLOSETS

1. That the installation conforms in every respect as to "housing", number of toilets required, design, standards of construction, materials, ventilation, light, location, maintenance, etc., with the minimum standards found in orders or section numbers 5250—5265, inclusive, of Industrial Commission, Building Code, and State Board of Health, Plumbing Code.

2. That the materials used on the various units, bowl, tanks, seat, vents, agitator, dip tube, roof terminal, etc., comprising the chemical closet shall be of proper design and construction, and so installed that the highest degree of efficiency possible is insured.

(a) The bowl shall be of vitreous ware and so designed as to be easily kept clean and provided with a top vent attachment.

(b) The dip tube conveyor pipe between the bowl and tank shall be free from offsets, not over four feet in length, shorter where practicable, and be of copper or other nonabsorbent, indestructible material.

(c) The joints between bowl and tip tube, and tank and dip tube shall be made water-tight.

(d) The material used in the construction of the tank shall be of such quality and weight and so protected that it will serve for a period of ten years without replacement.

(e) The ventilating system shall be of substantial material, adequate size, and constructed to insure effective ventilation.

(f) The tank shall be provided with an efficient method of draining or cleaning out contents of the tank.

(g) The agitator shall be so constructed as to be easily operated.

(h) That plans and specifications be submitted for approval and be sufficiently detailed and cross-sectioned, etc., to enable the department to pass on the various essentials herein outlined.

Note. Order No. 5008 of the State Building Code requires that plans for new buildings be submitted to the Industrial Commission for approval. Plans so submitted will be referred by that department to the State Board of Health for approval of toilet requirements.

3. The phenol coefficient of the chemical used shall be clearly stated on the package or container. Full directions for using the chemical shall be furnished with each package or container. The

chemical solution so used, shall at all times be maintained of such a strength as to effectively sterilize the tank contents.

4. That the installation at all times shall be maintained in a sanitary and serviceable condition, and the materials when removed from the tank disposed of in such a manner that a nuisance is not created.

5. Before any type of chemical closet is installed in any school building the school board of that district or its legal representative shall apply to the State Board of Health for permission to install such toilet, giving the size and description of the school building and other existing conditions effecting the installation, also the source and type of water supply, the character of the soil, the lay of the land, and the type of chemical closet to be installed. When the installation has been completed the State Board of Health shall be notified so that an inspection may be made before the installation is accepted by the school board or district.

6. In giving permission for the installation of chemical toilets the State Board of Health does not assume responsibility for the satisfactory operation of the installation, in whole or in part, but reserves the right to order its removal should conditions dangerous to health or otherwise objectionable arise therefrom.

DRY CLOSETS

1. That the installation conform in every respect as to "housing", number of toilets required, design, standards of construction, materials, ventilation, light, location, maintenance, etc., with the minimum standards found in orders or section numbers 5250 to 5265, inclusive, in Industrial Commission, State Building Code, and State Board of Health, Plumbing Code.

2. That the materials and construction of the various units comprising the dry closet system be of proper design, and so installed that the highest degree of efficiency possible is insured.

3. That the vault and conveyors be of proper design and watertight construction.

4. That the cross section vault area be at least 50% larger than the combined foul air conveying flues connected therewith, and that the open space below the grates be at least from 8 to 10 inches in height.

5. That the foul air duct, stack, and heater be of adequate capacity and that a fire be maintained either in the stack heater or heating system at all times so as to insure proper ventilation.

6. That the foul air duct, or ducts, be provided with a damper of efficient design and conveniently located, and that the foul air removal system be so constructed as to exclude, under all proper conditions involving maintenance, obnoxious odors from any part of

the building and so that it will comply with the fire protection requirements of the state building code.

7. That the chimney containing the stack heater be extended to a height of from 8 to 10 feet above the highest part of the building so as to insure effective ventilation.

8. The closet hopper shall be so designed and of such material that it can be kept clean and be provided with an approved seat.

9. That plans and specifications be submitted for approval and be sufficiently detailed and cross-sectioned, etc., to enable the department to pass on the various essentials herein outlined.

Note. Order No. 5008 of the State Building Code requires that plans for new buildings be submitted to the Industrial Commission for approval. Plans so submitted will be referred by that department to the State Board of Health for approval of toilet requirements.

10. That the vault be burned out and cleaned and disinfected whenever necessary.

11. That the installation at all times shall be maintained in a sanitary and serviceable condition, and the material, when removed, from the vault be disposed of in such a manner that a nuisance is not created.

12. Before any type of dry closet is installed in any school building the school board of that district or its legal representative shall apply to the State Board of Health for permission to install such toilet, giving the size and description of the building, the source and type of water supply, the lay of the land and character of the soil, also the type of closet to be installed. When the installation has been completed the State Board of Health shall be notified so that an inspection may be made before the installation is accepted by the school board or district.

13. Under the law the State Board of Health reserves the right to reject any and all types of closets and may prohibit the installation of any such closet when in its judgment such prohibition is wise.

14. In giving permission to install dry closets the State Board of Health does not assume responsibility for the satisfactory operation of the installation, in whole or in part, and reserves the right to order its removal should conditions dangerous to health or otherwise objectionable arise therefrom.

The attention of the school board and others interested is directed to modern conveniences, such as running drinking water, washing facilities and water flushed toilets which can, in most cases, be installed at a reasonable cost considering the protection and comforts thus afforded. The State Board of Health will render you assistance in making a full investigation of all factors to be considered in determining which system of toilets will serve your particular condition best, and thus protect the lives and welfare of your children and those employed in your schools.

INSTRUCTIONS TO TEACHERS

It is obvious to any one at all familiar with the prevention of communicable diseases that the teacher may be of great assistance in enforcing preventive measures. Teachers come in close contact with children and under present conditions the schools are often ideal places for the transmission of communicable diseases. The teachers, therefore, should be constantly alert to detect at once the presence of any communicable disease among the children under this supervision. By constant watchfulness, a great deal of sickness and a large number of deaths due to communicable diseases contracted in the schools will be avoided. "Eternal vigilance on the part of the teachers is the price which must be paid in safeguarding the health of school children."

Not only should teachers use every precaution to prevent the introduction or spread of preventable diseases in the schools, but they should also see that the schoolroom is properly ventilated, that a sufficient supply of fresh drinking water is provided and that the children are educated in habits of personal cleanliness. This includes the care of the teeth, the washing of the face and hands and other matters that are of more vital importance to the well-being of the pupils than the reciting of lessons. Teachers should realize that their duty is not complete when only the daily lessons are learned.

The following is a brief outline of suggestions to teachers which may be helpful.

1. Teachers should remember that infection enters and leaves the body in the secretions of the mouth, nose, throat, intestines and through the skin.

2. Sunshine, pure air, good food, exercise and cleanliness are the best aids to good health.

3. The exchange or borrowing of all articles which might be used in common, such as pencils, penholders and slates, which are liable to be soiled with secretions of the eye, nose or mouth should be prohibited.

4. Cleanliness in and after each use of the toilet should be insisted upon.

5. When diphtheria or scarlet fever is present in the community, all children with sore throats or discharging noses or ears should be excluded from school, and no child returning to school, after an

attack, with discharging nose or ears or without a permit from the health officer should be allowed to remain.

6. When measles is present in the community, all children showing symptoms of a marked cold in the head should be immediately excluded from school.

7. All children with whooping cough should be kept at home.

Duty of Teachers. Section 1408a. Upon the appearance of any dangerous communicable disease in any school district, it shall be the duty of the health officer of the township, incorporated village, or city where the schoolhouse is located to notify at once, in writing, the principal or teacher of such school, giving the names of all families where the disease exists. If the rules of the State Board of Health provide for the exclusion from school of teachers, or pupils from homes where such disease exists, the health officer shall request the principal of the school to exclude from school attendance all such persons until a written order signed by the health officer permitting attendance at school is presented.

Whenever the principal or teacher of the school has been notified of the prevalence of a dangerous communicable disease in the school district, or whenever the principal or teacher of the school knows or suspects that a dangerous communicable disease is present in the school district, it shall be the duty of such principal to at once notify the health officer of the town, village, or city where the schoolhouse is located, of such absence from school on account of sickness. The health officer must then investigate all such cases, to determine whether or not a dangerous communicable disease is present in such family.

Exclusion from School. Section 1408b. Parents, guardians, or persons having custody of any child or children, shall not permit such child or children, if afflicted with a dangerous communicable disease, or if they have been exposed to a dangerous communicable disease, except tuberculosis and typhoid fever, to attend any school.

CHARACTERISTICS OF THE COMMUNICABLE DISEASES

Note. The period of incubation is the time which elapses after the reception of the infection until the first symptoms occur.

Tuberculosis. Tuberculosis, or consumption, is a very common and very fatal disease which is nearly always contracted from one who has the disease, or from food and drink in which tubercular germs are present. Every case of tuberculosis is the result of infection, but there are many contributory causes, such as living and sleeping in unventilated rooms, insufficient or unsuitable food, etc. A cold which settles on the lungs and remains for weeks or months should arouse suspicion, and it is always advisable in such cases to consult a reliable physician. A child who coughs daily should see the family physician for an examination, especially if the cheeks become flushed in the afternoon and fatigue is easily induced. The pale, anaemic child, with a narrow chest, is a likely subject for tuberculosis. Good food, pure air, sunshine and plenty of outdoor exercise are the enemies of tuberculosis. Children should be taught *not* to sleep in a room with anyone who has tuberculosis.

Scarlet fever, (scarlatina, scarlet rash.) Period of incubation two to five days. The onset of the symptoms is unusually sudden. The rash appears within twenty-four or forty-eight hours after the first symptoms (shorter than in measles or smallpox), usually coming out first on the neck and chest, afterward extending to the limbs. The fever does not abate suddenly, after the appearance of the eruption, as in measles and smallpox. Rash consists of a multitude of fine red or scarlet points, the color of which is diffused over the whole surface. Sore throat is nearly always an early and prominent symptom. The tongue usually presents a peculiar appearance designated as "strawberry tongue." Cases are immediately and dangerously infectious and continue so until the completion of the desquamation, or peeling, which is often quite prolonged. The infection may come directly from the patient or be carried upon the person or in the clothing of those who have not had the disease. Infected clothing, furniture, rooms, etc., may retain their infectious qualities for a long time unless very carefully and thoroughly disinfected. After 10 or 12 years of age there is a rapid diminution of susceptibility on the part of the child to the infection of scarlet fever. (See circular on scarlet fever.)

Diphtheria. Period of incubation two to seven days, but may be longer or shorter. The distinctive feature of the disease is a false membrane which invades the mucous membrane, more frequently the membrane of the throat. The false membrane appears at first as a whitish patch, or there may be several such spots, which may gradually or rapidly increase in size and coalesce. The condition and appearance of the false membrane as first discovered may remain stationary for a while, or gradually disappear. Occasionally in cases of diphtheria the false membrane is in the nose passages or in other localities where it is not to be seen. When diphtheria is prevalent it is safer to regard all cases of sore throat as diphtheria, and to require a reasonable amount of care until they are known to be nondiphtheretic and noninfectious. *Diphtheretic sore throat is diphtheria.*

The diphtheretic infection is much more dangerous to children than to adults. Adults, or even children who have been exposed to the infection very often have the germs of diphtheria growing and multiplying in their throats and are, therefore, dangerous infection carriers even when they have no sore throats. Persons who have had diphtheria occasionally carry the infection in a dangerous form in their throats after complete recovery has apparently occurred. When a person who has had diphtheria ceases to be infectious that fact should be determined by examinations made in the State Laboratory of Hygiene. It is sometimes difficult for the most experienced physician to determine whether a case may or may not be diphtheria and the laboratory should be used to determine the question. Antitoxin should be used early in all cases. (See circular on diphtheria.)

Measles. Period of incubation eight days on an average, or twelve days to the appearance of the rash. Eruption preceded for about four days by catarrhal symptoms, like those of a severe cold in the head. Fever falls rapidly after the eruption is fully out. Rash usually begins on the face as slightly raised red spots which form crescent shaped groups, coalescing into patches of irregular outline. Eruption more distinctly "blotchy" than in scarlet fever and a duller red instead of scarlet. Measles is infectious in its earliest stages before the rash has appeared. Children can return to school after complete recovery.

Whooping cough. May be communicated either directly from the patient or through the medium of infected clothing, etc. Period of incubation about six days. The peculiar cough is usually characterized by a series of quick, short, forcible expirations with flushed face, then recovery of breath with a long shrill whoop, or a succession of such. The "whooping" begins in the second week of the disease; sometimes later. The earlier symptoms are like those of a common cold with a cough of ordinary character. The infection lasts from six to eight weeks after the disease is declared.

Typhoid fever. Period of incubation fourteen to twenty-one days, but may be shorter, especially in cases with a severe and rapid course. The natural duration of the disease is three or four weeks, but severe cases may end fatally even in ten or twelve days, or mild cases may recover in two or three weeks. The infection is given off by the patient principally in the dejections, both solid and liquid, therefore, the proper disinfection and disposition of these will go far in preventing other persons taking the disease.

Typhoid fever is very frequently spread by contact infection, for instance, by the hands of the attendant who, at the same time, without washing and disinfecting her hands carefully, prepares the meals of other persons; by cups or spoons or other articles which have been used in the sick room and have not been disinfected before subsequent use, etc. Infected water and infected milk are frequent agencies for conveying typhoid infection. Flies also carry the typhoid germs. Antityphoid vaccine will prevent typhoid fever. This material is distributed free of charge by the State Laboratory of Hygiene to all physicians of the state. (See circular on typhoid fever.)

Smallpox. Period of incubation ten to fourteen days. The eruption begins to show as small red spots or specks, and then as pimples or papules, at first on the face and wrists, gradually passing over the body. Sometimes, though rarely, at this stage a diffused rash appears. The papules are changed in about twenty-four hours into vesicles which, when they are sufficiently developed, show a characteristic depression in the center, that is, are "umbilicated." The contents of the vesicles gradually become yellow, and the eruption has then become pustular. In varioloid the eruption aborts at various stages. Severe pain in the back and headache are some characteristics of smallpox. There is usually a marked diminution of the fever after the eruption is out. Smallpox is intensely infectious, but less so in the earlier stages of the eruption. The smallpox patient is infectious until the skin is cleared of all crusts and careful disinfection is done.

Vaccination not only lightens smallpox, if one happens to take it, but when successfully done, and not too remotely, insures almost absolute protection from taking the disease.

Ordinarily the schools should not be closed when smallpox is present in the school district. Under the provisions of Chapter 113, Laws of 1907, the attendance at school of any and all pupils or teachers who have not been successfully vaccinated or who fail to show a certificate of recent vaccination is prohibited for a period of twenty-five days when smallpox is present in the school district or any part thereof. Should new cases of smallpox continue to develop in such school district, after the expiration of twenty-five days, the local board of health shall, upon the advice and consent of the State Board of Health, renew such order for another period of twenty-five days or so many days thereof as the State Board of Health may deem necessary in order to control the epidemic. The local board of

health is authorized to provide for the free vaccination of all children in any school district or any part thereof during an epidemic of smallpox, the necessary expense incurred to be paid by the town, village or city upon the order of the local board of health.

German measles (Rotheln). This eruptive disease has no relation to measles or scarlet fever with which it is sometimes confounded. Its period of incubation is long, two to three weeks. The eruption appears earlier than in measles, often within twenty-four hours after the first symptoms. The rash fades about the third day or earlier and the fever gradually disappears with the rash. Desquamation is absent or very slight. The eruption is not so "blotchy" as that of measles; sometimes resembles that of scarlet fever. Incubation is longer than that of measles and much longer than that of scarlet fever. Period of invasion shorter than that of measles. Catarrhal symptoms not so severe as in measles. Throat symptoms not so marked a feature as in scarlet fever. Patient should not return to school until at least two weeks after recovery.

Croup. Membranous croup is diphtheria of the air passages, and the same precautions should be observed as are carried out in ordinary diphtheria.

Chicken pox. Period of incubation ten or fourteen days, may be shorter or may be prolonged to eighteen or twenty days. Period of invasion very short. A disease of childhood. The eruption consists of clear watery blisters or vesicles, scattered irregularly over the body. The eruption is often the first thing noticed. Premonitory symptoms are often overlooked as also are often the small red spots preceding the vesicles. The "blisters" reach their full development in twenty-four to thirty-six hours; but from the first observation to full development the time is often much shorter. Successive crops of vesicles and unequal development of them on the same parts of the body. With the appearance of the eruption, the fever increases. (Compare with smallpox.)

Children who have any of the following diseases are prohibited from attending school

Asiatic cholera (cholerine), yellow fever, smallpox, typhus fever, bubonic plague, diphtheria (membranous croup), scarlet fever (scarlatina), measles including rotheln, chicken pox, mumps, pulmonary tuberculosis, whooping cough, cerebrospinal meningitis or acute anterior poliomyelitis.

Children from homes where any of the following diseases exist cannot attend school

Asiatic cholera (cholerine), yellow fever, smallpox, typhus fever, bubonic plague, diphtheria (membranous croup), scarlet fever (scarlatina), measles, cerebrospinal meningitis or acute anterior poliomyelitis. [See rule 19 for exceptions in case of Measles.]

INSTRUCTIONS FOR PHYSICIANS AND OTHER PERSONS REQUIRED TO REPORT DANGEROUS COMMUNICABLE DISEASES

In case of Diphtheria, Scarlet Fever, Smallpox, Acute Cerebrospinal Meningitis, Acute Anterior Poliomyelitis, Asiatic Cholera, Typhus Fever and Bubonic Plague the following minimum requirements must be complied with.

1. Cases must be reported to the local health officers within twenty-four hours.
2. Quarantine sign required on house in conspicuous place.
3. Thorough disinfection of infected rooms and contents after death or recovery of patient and before quarantine is removed.
4. Milk or dairy products from a dairy or farm where disease exists can not be sold or used unless the milk is handled, milk utensils washed, stock cared for and product transported by persons entirely disassociated with the quarantined family.

QUARANTINABLE DISEASES AND REGULATIONS

For Diphtheria or Membranous Croup.

1. Quarantine for patient at least fourteen days or until two negative cultures, taken three days apart by a representative of the health department, show the absence of diphtheria bacilli.
2. Persons associated with or in the family with the patient must be quarantined. Adults in family may be released from quarantine after fumigation of clothing and complete antiseptic bath.

For Scarlet Fever.

1. Minimum quarantine twenty-one days, or longer, until desquamation is complete. Adults in family may be disinfected and released, provided they do not return to the quarantined home. Children in the household not ill may be disinfected and quarantined elsewhere for ten days or until the symptoms of scarlet fever develop. Children convalescing from scarlet fever can not attend school for at least six weeks from the beginning of the disease. Well children in same family can not attend school for ten days after removal of quarantine.

For Smallpox.

1. Quarantine for patient until all crusts or scales have fallen off. For exposed persons quarantine for fourteen days after date of last exposure, unless successfully vaccinated and disinfected. Wage earners in family may be vaccinated, disinfected and leave premises.
2. When smallpox is present in a school district teachers or pupils who have not been successfully vaccinated or who fail to show a certificate of recent vaccination can not attend school for twenty-five days after the appearance of the disease.

For Spinal Meningitis (Acute Cerebro).

1. Quarantine of patient and attendant and isolation from rest of family for at least fourteen days. (Other members of family not quarantined.)

For Acute Anterior Poliomyelitis (Infantile Paralysis).

1. Minimum quarantine at least three weeks from beginning of the disease. Adults in family may be released from quarantine after disinfection of clothing and complete antiseptic bath. All children who have been exposed to the disease should be isolated at least fourteen days from the date of last exposure.

For Asiatic Cholera (Cholerine) and Yellow Fever.

1. Quarantine for patient until after death or complete recovery. Quarantine for exposed persons five days from date of last exposure.
2. Most rigid disinfection of all discharges.

For Typhus Fever.

1. For patient quarantine until after complete recovery. For exposed persons quarantine for twenty-one days from date of last exposure. Since this disease is spread by body lice clothing should be removed, burned or disinfected by immersing in a 1–500 bichloride of mercury solution or by boiling.

For Bubonic Plague.

1. Quarantine for patient until after death or complete recovery. For exposed persons quarantine for eight days from date of last exposure.
2. Thorough disinfection of all discharges.

DISEASES WHICH MUST BE PLACARDED

Typhoid Fever.

1. Cases must be reported to the local health officer within twenty-four hours.
2. Conspicuous placard on house.
3. Isolation of patient. No restrictions on other members of family. Excreta from patient must be thoroughly disinfected.
4. Thorough disinfection of infected rooms and contents after death or recovery of patient and before placard is removed.
5. Milk or dairy products from a dairy or farm where disease exists can not be sold or used unless the milk is handled, milk utensils washed, stock cared for and product transported by persons entirely disassociated with the family.

Measles Including Rubella (Rotheln).

1. Cases must be reported to local health officer within twenty-four hours.
2. Conspicuous placard on house.
3. Children who have measles are not permitted to leave the premises and any children other than members of the family shall not enter or remain upon the premises while the home is placarded. Children who have had measles may attend school from the home. Well children in family who have not had measles may return to school after fourteen days from date of last exposure provided they take up their residence in another home.
4. There are no restrictions on the adult members of the family.
5. Thorough disinfection of the infected rooms and contents after death or recovery of patient and before placard is removed.

Whooping Cough.

1. Cases must be reported to the local health officer within twenty-four hours.
2. Conspicuous placard on house.
3. Isolation of patient until after whooping stage (about six weeks).

4. Children who have whooping cough are not permitted to leave the premises and children other than members of the family shall not enter or remain upon the premises while the home is placarded. Well children may go to school.
5. Thorough disinfection of the infected rooms and contents after death or recovery of patient and before placard is removed.

Chicken Pox.

1. Cases must be reported to local health officers within twenty-four hours.
2. Conspicuous placard on house.
3. Children who have chicken pox can not attend school or leave the premises. Children other than members of the family shall not enter or remain upon the premises while the home is placarded.
4. Fumigation not required. Well children may go to school.

DISEASES WHICH MUST BE REPORTED BUT NOT PLACARDED OR QUARANTINED

Mumps.

1. Cases must be reported to local health officer within twenty-four hours.
2. Children who have mumps can not attend school.
3. This disease is an epidemic affection and is transmitted almost exclusively by direct contact from person to person.

Erysipelas.

1. Cases must be reported to the local health officer within twenty-four hours.
2. Patients must be isolated from other members of the family.
3. Disinfection of materials coming in contact with the erysipelatous areas required.

Tuberculosis (of any organ).

1. Cases must be reported to the local health officer within twenty-four hours.
2. Teachers or pupils who have pulmonary tuberculosis cannot attend school.
3. Careful instructions regarding the disinfection of sputum, proper diet and sleeping facilities should be given.
4. Every person who has tuberculosis of the lungs or larynx must provide a sputum flask or receptacle in which he shall deposit all expectorations while in a public conveyance or attending any public place.
5. Thorough disinfection of infected rooms and contents after death or recovery of patient is required by law.

Trachoma.

1. All cases must be reported to the local health officer within twenty-four hours.
2. Patient should use individual towel and washbasin. Discharges from eyes should be collected on cloths or paper napkins and burned. Intimate contact with others should be prohibited.

Ophthalmia Neonatorum.

1. Cases must be reported to local health officer within twenty-four hours.
2. Discharges from eyes should be collected on cloths or paper napkins and burned.

About one-third of the cases of blindness due to this local cause result from this easily preventable disease.

Venereal Diseases.

All cases of syphilis and gonorrhea must be reported by the attending physician. A special form of blank is furnished physicians for reporting these cases direct to the State Board of Health. The patient's name is not required.

Cost of Disinfection.

When fumigation is required after the death or recovery of a person suffering from a dangerous communicable disease the work must be done by or under the direction of the local health officer and the expenses incurred paid by the township, incorporated village or city upon the order of the local board of health.

Disinfection without fumigation shall be required where a case of ophthalmia neonatorum, measles, whooping cough, typhoid fever and chicken pox, has occurred.

Disinfection is defined to be the washing of all woodwork, doors, casings and other articles which may be infected, with a proper solution of bichloride of mercury, carbolic acid, corrosive sublimate, formaldehyde or other approved disinfectant containing the phenol coefficient as determined by the Marine Hospital Laboratory. (The material used for disinfection can be left at the home by the health officer with instructions for properly doing the work.)

Fumigation is defined to be the liberation in the room of formaldehyde gas in sufficient quantities and under proper conditions to accomplish satisfactory aerial disinfection. This work must always be done by the health officer or some competent person employed by the board of health for that purpose.

PAT. JAN. 21, 1908

0 020 948 950 8